

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07248

**FILED**  
**Jun 30, 2004**  
**Secretary of State****Entity Name:** ANIMAL STERILIZATION AND RABIES ASSISTANCE LEAGUE, INC.**Current Principal Place of Business:**324 CHRISTMAS TREE LANE, ROUTE 6  
PANAMA CITY, FL 32413**New Principal Place of Business:**HOLIDAY LODGE  
6518 W HWY 98  
PANAMA CITY BEACH, FL 32413**Current Mailing Address:**PO BOX 7082  
PANAMA CITY BEACH, FL 324130082**New Mailing Address:****FEI Number:** 59-2487314      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**TRENT, ANN  
2422 MAGNOLIA DR  
PANAMA CITY, FL 32408      US**Name and Address of New Registered Agent:**HUTTON, JOHN  
319 MOONLIGHT BAY DR  
PANAMA CITY BCH, FL 32407      US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOHN HUTTON

06/30/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** D      ( ) Delete  
**Name:** BROWN, HAL H  
**Address:** 101 VILLA CT  
**City-St-Zip:** PANAMA CITY BEACH, FL 32413**Title:** DPV      ( ) Delete  
**Name:** TRENT, ANN  
**Address:** 2422 MAGNOLIA DR  
**City-St-Zip:** PANAMA CITY, FL 32408**Title:** D      ( ) Delete  
**Name:** MCMILLAN GERTRUDE,  
**Address:** 324 CHRISTMAS TREE  
**City-St-Zip:** PANAMA CITY BEACH, FL**Title:** DS      ( ) Delete  
**Name:** WAINWRIGHT, NANCY  
**Address:** 114 N EAST AVE  
**City-St-Zip:** PANAMA CITY, FL 32401**Title:** DT      ( ) Delete  
**Name:** KEITH, LINDA  
**Address:** 119 GRANGER LN RT 15  
**City-St-Zip:** PANAMA CITY BEACH, FL 32413**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** DTR      (X) Change ( ) Addition  
**Name:** BROWN, HAL H  
**Address:** 101 VILLA CT  
**City-St-Zip:** PANAMA CITY BEACH, FL 32413**Title:** D      (X) Change ( ) Addition  
**Name:** TRENT, ANN  
**Address:** 2422 MAGNOLIA DR  
**City-St-Zip:** PANAMA CITY, FL 32408**Title:** DP      (X) Change ( ) Addition  
**Name:** HUTTON, JOHN  
**Address:** 319 MOONLIGHT BAY DR  
**City-St-Zip:** PANAMA CITY BEACH, FL 32408**Title:** DS      (X) Change ( ) Addition  
**Name:** HUTTON, KANDY  
**Address:** 319 MOONLIGHT BAY DR  
**City-St-Zip:** PANAMA CITY BCH, FL 32408**Title:** DVP      (X) Change ( ) Addition  
**Name:** BURDESHAW, DEBI  
**Address:** 2804 LAGOON KNOOL AVE  
**City-St-Zip:** PANAMA CITY BEACH, FL 32408

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN HUTTON

DP

06/30/2004

Electronic Signature of Signing Officer or Director

Date